

Clear Form

FILED

AUG 15 2022 *fs*

CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

Robin Kelly

Plaintiff,

vs. *City of Sausalito*

Defendant.

C22-04671

CASE NO. _____

APPLICATION TO PROCEED
IN FORMA PAUPERIS

(Non-prisoner cases only)

I, *Robin Kelly*,

declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ___ No X

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: _____ Net: _____

Employer: _____

If the answer is "no," state the date of last employment and the amount of the gross and net salary

1 and wages per month which you received.

2 _____
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 5 2. Have you received, within the past twelve (12) months, any money from any of the
 6 following sources:

- 7 a. Business, Profession or Yes ____ No ____
 8 self employment?
 9 b. Income from stocks, bonds, Yes ____ No ____
 10 or royalties?
 11 c. Rent payments? Yes ____ No ____
 12 d. Pensions, annuities, or Yes ____ No ____
 13 life insurance payments?
 14 e. Federal or State welfare payments, Yes X No ____
 15 Social Security or other govern-
 16 ment source?

17 If the answer is "yes" to any of the above, describe each source of money and state the amount
 18 received from each.

19 SSI \$760.00/ Time a month
 20 _____

21 3. Are you married? Yes ____ No X

22 Spouse's Full Name: _____

23 Spouse's Place of Employment: _____

24 Spouse's Monthly Salary, Wages or Income:

25 Gross \$ _____ Net \$ _____

26 4. a. List amount you contribute to your spouse's support: \$ _____

27 b. List the persons other than your spouse who are dependent upon you for support
 28 and indicate how much you contribute toward their support. (NOTE: For minor

children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.)

5. Do you own or are you buying a home? Yes ___ No X

Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

6. Do you own an automobile? Yes ___ No X

Make _____ Year _____ Model _____

Is it financed? Yes ___ No ___ If so, Total due: \$ _____

Monthly Payment: \$ _____

7. Do you have a bank account? Yes ___ No X (Do not include account numbers.)

Name(s) and address(es) of bank: _____

Present balance(s): \$ _____

Do you own any cash? Yes ___ No ___ Amount: \$ _____

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes ___ No ___

8. What are your monthly expenses?

Rent: \$ _____ Utilities: 60⁰⁰

Food: \$ 200 Clothing: 25

Charge Accounts:

<u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Account</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

9. Do you have any other debts? (List current obligations, indicating amounts and to whom they are payable. Do not include account numbers.)

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10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ☒ No ☐

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

21CW-01143 · 3:22-CV-03113

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

Aug 14, 2022 Robyn Kuntz
DATE SIGNATURE OF APPLICANT